O.L.P. E. 40, 88

TRANSMITTAL FORM (to be used for all correspondence after initial f	Application Number Filing Date First Named Inventor	Approved for use through 07/31/2006. OMB 0651-0031 ent and Trademark Office; U.S. DEPART MENT OF COMMERCE ation of information unless it displays a valid OMB control number. 09/767,603 January 22, 2001 Brennan J. McTernan 2141 Stephan F. Willett
Fee Transmittal Form Fee Attached Amendment/Reply After Final Affidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement Certified Copy of Priority Document(s) Response to Missing Parts/ Incomplete Application Response to Missing Parts under 37 CFR 1.52 or 1.53	Drawing(s) Licensing-related Papers Petition Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence Add Terminal Disclaimer Request for Refund CD, Number of CD(s) Remarks	After Allowance communication to Technology Center (TC) Appeal Communication to Board of Appeals and Interferences Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) Proprietary Information
Firm or Individual name Signature Date CI I hereby certify that this correspondence is be	ERTIFICATE OF TRANSMISSIO	
the date shown below. Typed or printed name Seth H. Ostrow Signature		Date 4-05

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

APR 0 6 2005 THE TRIPE

PTO/SB/83 (09-04)

Approved for use through 11/30/2005. OMB 0651-0035

U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Address to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT AND CHANGE OF **CORRESPONDENCE ADDRESS**

Application Number	09/767,603	
Filing Date	January 22, 2001	
First Named Inventor	McTernan	
Art Unit	2141	
Examiner Name	Stephan F. Willett	· · · · · · · · · · · · · · · · · · ·
Attorney Docket Number	4700/5	
Art Unit Examiner Name	2141 Stephan F. Willett	_

To: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450											
Please withdraw me as attorney or agent for the above identified patent application, and											
all the attorneys/agents of record.											
the attorneys/agents (with registration numbers) listed on the attached paper(s), or											
the attorneys/agents associated with Customer Number											
NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.											
The reasons for this request are: The attorneys of record are unable to contact the Applicants (real party in interest, Sorceron, Inc.) after undertaking diligent efforts. All correspondence to the Applicant's last know address has been returned by the United States Postal Service as undeliverable and unable to forward. The Applicants have also failed to return all phone messages left at the last known telephone number.											
CORRESPONDENCE ADDRESS											
The correspondence address is NOT affected by this withdrawal. Change the correspondence address and direct all future correspondence to: The address associated with Customer Number:											
OR											
Firm or Individua	l Name	Jonathar	Prince								
Address		Sorceron 75 Ninth Suite 6 E	Avenue							•	
City	New York State NY							Zip 10011			
Country	Country USA										
Telephone			1					Fax			
Signature Act	feet	Sil									
Name Seth F							Regis	Registration No. 37,410			
Date April 12005 Tel					Telep	Telephone No. 212-895-2000					
NOTE: Withdrawal is date of a time period f	effective wh	nen approvi	ed rather than when re e extension period, the	sceived. Unle	ss there a	re at lea.	st 30 days	between	approva	al of witho	rawal and the expiration

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.